ATENT APP ATION FEE DETERMINATION REC

Application or Docket Number

533,980

l		CLAIMS.	as filed .	PARTI		٠.						
								SMALL ENTITY TYPE		OR	OTHER	THAN
U.S	S. NATIONAL	STAGE FEES	34			(Column 2)	1		<u> </u>	ייט ד	SMALL	ΕΝΠΙΥ
┝	SIC FEE					~~~~ <u>~</u>		RATE	FEE		RATE	FEE
 			Satisfies PCT Article 33(1)			GE ENT. = \$ 300	١.	BASIC FEE	150	OR	BASIC FEE	1
-	AMINATION FI	EE	(4) = \$50/\$ 100 U.S. Is ISA = \$50/\$ 100		All 00	her situations = 100 / \$ 200		EXAML FEE	106	1	EXAM FEE	
	ARCH FEE		ALL other countries = \$ 200 / \$ 400			her situations = 250 / \$ 500		SEARCH FEE	200		SEARCH FEE	()
FEE	FOR EXTRA	SPEC. PGS.	/ 05 minus 100 =		5	150 = /		X \$ 125 =	125	1	X \$ 250 =	
TO1	TAL CHARGEA	BLE CLAIMS	3 /minus 20 = .		_	18		X \$ 25 =	V50	OR	X \$ 50 =	
IND	EPENDENT C	AIMS .				, . /		X \$ 100 =	100	OR	X\$200=	
MUI	TIPLE DEPEN	IDENT CLAIM PR	SENT			Ø		+\$ 180 =	180	OR	+\$ 360 =	-
* If the difference in column 1 is less than zero, enter "O" in column 2							•	TOTAL	1305	OR	TOTAL	ــــــــــــــــــــــــــــــــــــــ
CLAUTO AO AMESTE									1	1 0	TOTAL	
CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	4	Minus	**		=		X \$ 25 =		OR.	X \$ 50 =	
	Independent	•	Minus	***		3		X \$ 100 =		OR	X \$ 200 =	<u></u>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ì	+\$ 180=		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT.	
		(Caluma 4)				•					rec ;	
		(Column 1)		(Column		(Column 3)	г	· · ·	· · · · · · · · · · · · · · · · · · ·	•		
OMENT B		REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE
AMENDM	Total	*	Minus	**		н		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ī	+\$180=		OR	+ \$ 360 =	
								FEE		OR L	TOTAL ADDIT.	
											FEE [
	If the entry in cat-	ıma 1 ie loes then **		. ,,,		_				٠		
	If the "Highest Nu	imn 1 is less than the imber Previously Pai	d For" IN THIS SP	ACE is less th	ነልብ ኃብ	enter "20"						
	if the "Highest Nu	imber Previously Pal mber Previously Paid	d For IN THIS SE	ACF & loss #		Bolor =3*	n (he	appropriate be-				
				•	-			- PY VANIAGE DOX	mi Column 1.			